

ANUSREE S

Medical Coder

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Visa Status: Visit Visa

PROFESSIONAL SUMMARY

Dedicated and detail-oriented Medical Coder with hands-on experience in accurately reviewing and assigning diagnostic and procedural codes for healthcare services. Skilled in ICD-10-CM, CPT, and HCPCS coding systems, with a strong understanding of medical terminology, anatomy, and insurance guidelines. Proven ability to maintain high accuracy, meet productivity targets, and ensure compliance with regulatory and payer requirements. Adept at analyzing medical records to ensure proper documentation and coding for optimal reimbursement. Eager to contribute to UAE's dynamic healthcare sector. Seeking a challenging position to contribute expertise in medical coding and enhance the efficiency of healthcare revenue cycle operations.

WORK EXPERIENCE

Medical Coder

AGS Health Pvt. Ltd., Chennai, India | Jan 2025 – Aug 2025

- Reviewed and analyzed patient medical records, including physician documentation, laboratory results, and diagnostic reports, to ensure the accuracy and completeness of coding.
- Assigned appropriate ICD-10-CM, CPT, and HCPCS codes in compliance with official coding guidelines, payer policies, and regulatory standards.
- Ensured proper documentation to support coding decisions and minimized claim denials or rejections through accurate data entry and compliance adherence.
- Collaborated closely with physicians, clinical staff, and billing teams to resolve documentation deficiencies and clarify ambiguous information.
- Maintained a high level of productivity and quality standards, consistently achieving departmental accuracy goals and turnaround times.
- Participated in ongoing training sessions and audits to stay updated with the latest coding rules, CMS guidelines, and payer-specific requirements.

Medical Coder

Omega Healthcare, Trichy, India | Mar 2023 – Sep 2024

- Conducted detailed review and analysis of healthcare records, ensuring accurate translation of medical documentation into standardized coding systems (ICD-10-CM, CPT, HCPCS).
- Coded inpatient and outpatient encounters for various medical specialties including surgery, radiology, and internal medicine, adhering to compliance and reimbursement standards.
- Verified and validated codes for accuracy to optimize reimbursement and minimize claim denials, ensuring adherence to payer-specific guidelines and regulatory compliance.
- Worked collaboratively with physicians and auditors to identify and correct documentation gaps, improving coding accuracy and revenue integrity.
- Ensured timely and precise submission of coded data into billing systems to facilitate efficient claim processing and payment cycle management.
- Participated in periodic internal audits, providing feedback and implementing corrective measures for continuous improvement.
- Kept up to date with evolving healthcare regulations, coding updates, and payer requirements through continuous education and professional development programs.

PROFESSIONAL SKILLS

- Medical Coding & Billing
 - ICD-10 CM, CPT, HCPCS Coding
 - Medical Terminology
 - Time Management
 - Attention to Detail
 - Medical Record Review
 - Medicaid & Medicare Documentation
 - EMR Systems
 - Data Entry & Analysis
 - Document Review & Verification
 - E/M coding and denial management Problem Solving Skills
 - Adaptability & Flexibility
 - HIPAA Compliance
 - Electronic Health Record
 - Coding and Billing Audits
 - Medical Claims Processing
 - Claim Submission & Processing
 - Insurance & Compliance Guidelines
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TECHNICAL SKILLS

- Microsoft Office Suite (Word, Excel, PowerPoint, Outlook)
 - Data Entry and Management
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EDUCATION

Bachelor of Science in Botany

Kerala University, India | 2018 – 2021

Diploma in Computer Applications

Kerala University, India | 2019 – 2020

CERTIFICATIONS

Certified Professional Coder (CPC) – AAPC | Certification ID: 2308346

Valid and Internationally Recognized

LANGUAGES

- English
- Malayalam
- Tamil